

IN THE UNITED STATES DISTRICT COURT  
MIDDLE DISTRICT OF TENNESSEE

v.

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)  
)  
)  
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NO. \_\_\_\_\_

**APPLICATION TO PROCEED IN FORMA PAUPERIS  
WITH SUPPORTING DOCUMENTATION**

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**YOUR EMPLOYMENT AND INCOME DATA**

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1. NAME: (First Middle Last)

2. YEAR OF BIRTH:

3. LAST 4 DIGITS OF SOCIAL SECURITY NO.:

4. PHONE NUMBER:

5. HOME ADDRESS: (City/State Only)

8. CURRENT EMPLOYER: \_\_\_\_\_

CITY: \_\_\_\_\_

STREET: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

APT. NO.: \_\_\_\_\_

6. HOW LONG AT CURRENT

CITY: \_\_\_\_\_

ADDRESS? \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

7. OWN OR RENT? \_\_\_\_\_

9. TELEPHONE NO.: \_\_\_\_\_

10. HOW LONG AT CURRENT  
EMPLOYMENT? \_\_\_\_\_

11. OCCUPATION (Describe what you do)

12. IF NOT CURRENTLY EMPLOYED, GIVE MONTH AND YEAR OF LAST EMPLOYMENT:  
HOW MUCH DID YOU EARN PER MONTH? \_\_\_\_\_

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13. CURRENT MONTHLY INCOME

Salary or Wages	\$
Commissions	\$
All Other Sources ( <u>Pensions, Soc. Sec.,</u> <u>Rent, Interest, Dividends, Alimony, etc.</u> ):	\$
	_____
TOTAL	\$

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SPOUSE'S EMPLOYMENT AND INCOME DATA

1. NAME: (First Middle Last)	2. YEAR OF BIRTH:
3. LAST 4 DIGITS OF SOCIAL SECURITY NO.:	4. PHONE NUMBER:
5. HOME ADDRESS: (if different from yours) (City/State Only)	7. CURRENT EMPLOYER: _____
CITY: _____	STREET: _____
STATE: _____ ZIP CODE: _____	CITY: _____
6. HOW LONG AT CURRENT ADDRESS? _____	STATE: _____ ZIP CODE: _____
	8. TELEPHONE NO.: _____
	9. HOW LONG AT CURRENT EMPLOYMENT? _____
10. OCCUPATION (Describe what spouse does)	
_____	
_____	
_____	

**11. SPOUSE'S CURRENT MONTHLY INCOME**

Salary or Wages	\$
Commissions	\$
All Other Sources ( <u>Pensions, Soc. Sec.,</u> <u>Rent, Interest, Dividends, Alimony, etc.</u> ):	\$
	_____
<b>TOTAL</b>	<b>\$</b>

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**DEPENDENTS AND INCOME (if any)**

Initials of Dependents: (do not provide full name)	Age:	Relationship:	Living With Whom?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**TOTAL MONTHLY INCOME OF DEPENDENTS INCLUDING  
CHILD SUPPORT PAYMENTS (exclude spouse)** \$ \_\_\_\_\_

**TOTAL MONTHLY INCOME OF APPLICANT, SPOUSE, AND  
DEPENDENTS** \$ \_\_\_\_\_

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**ASSETS:**  
**(IN COMPLIANCE WITH PRIVACY POLICIES-DO NOT INCLUDE FULL FINANCIAL  
ACCOUNT NUMBERS IN YOUR RESPONSES-PROVIDE INFORMATION REQUESTED ONLY)**

CASH \$ \_\_\_\_\_

CHECKING ACCOUNTS--TOTAL BALANCE (List Banks Below) \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SAVINGS ACCOUNTS--TOTAL BALANCE (List Banks Below) \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

STOCKS AND BONDS \$ \_\_\_\_\_

REAL ESTATE--CURRENT FAIR MARKET VALUE  
(List Locations Below)

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL REAL ESTATE** \$ \_\_\_\_\_

VALUE OF PERSONAL PROPERTY, EXCLUDING VEHICLES (Itemize)

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL PERSONAL PROPERTY** \$ \_\_\_\_\_

**MOTOR VEHICLES**

Year/Make	License No.	Current Value
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**TOTAL VALUE OF MOTOR VEHICLES** \$ \_\_\_\_\_

**DEBTS OWED TO YOU (Give Name of Debtor)**

_____	\$ _____
_____	\$ _____

**TOTAL DEBTS OWED TO YOU** \$ \_\_\_\_\_

**OTHER ASSETS (ITEMIZE)**

_____	\$ _____
_____	\$ _____
_____	\$ _____

**TOTAL OTHER ASSETS** \$ \_\_\_\_\_

**TOTAL ASSETS** \$ \_\_\_\_\_

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**LIABILITIES:**

NOTES (LOANS) PAYABLE TO BANKS (List Banks and Amount of Loans)

_____	\$ _____
_____	\$ _____
_____	\$ _____

**TOTAL LOANS PAYABLE TO BANKS** \$ \_\_\_\_\_

NOTES (LOANS) PAYABLE TO OTHERS \$ \_\_\_\_\_

MORTGAGES PAYABLE ON REAL ESTATE \$ \_\_\_\_\_

CREDIT CARDS AND ACCOUNTS PAYABLE TO CREDITORS \$ \_\_\_\_\_

MEDICAL BILLS \$ \_\_\_\_\_

TAXES AND ASSESSMENTS PAYABLE \$ \_\_\_\_\_

OTHER LIABILITIES (Itemize)

_____	\$ _____
_____	\$ _____
_____	\$ _____

**TOTAL LIABILITIES** \$ \_\_\_\_\_